

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

Application or Docket Number

10/533156

CLAIMS AS FILED - PART I

SMALL ENTITY
TYPE ☐

OR

OTHER THAN
SMALL ENTITY

| | (Column 1) | (Column 2) |
|---|--|---|
| U.S. NATIONAL STAGE FEES | | |
| BASIC FEE | SMALL ENT. = \$ 150 | LARGE ENT. = \$ 300 |
| EXAMINATION FEE | Satisfies PCT Article 33(1) (4) = \$ 50 / \$ 100 | All other situations = \$ 100 / \$ 200 |
| SEARCH FEE | U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400 | All other situations = \$ 250 / \$ 500 |
| FEE FOR EXTRA SPEC. PGS. | minus 100 = | / 50 = |
| TOTAL CHARGEABLE CLAIMS | 8 minus 20 = | |
| INDEPENDENT CLAIMS | 1 minus 3 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

| RATE | FEE |
|------------|-----|
| BASIC FEE | |
| EXAM. FEE | |
| SEARCH FEE | |
| X \$ 125 = | |
| X \$ 25 = | |
| X \$ 100 = | |
| + \$ 180 = | |
| TOTAL | |

OR

| RATE | FEE |
|------------|---------|
| BASIC FEE | 300 |
| EXAM. FEE | 200 |
| SEARCH FEE | 800 |
| X \$ 250 = | |
| X \$ 50 = | |
| X \$ 200 = | |
| + \$ 360 = | |
| TOTAL | 1000.00 |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

Pre/Amdt

| | (Column 1) | (Column 2) | (Column 3) |
|---|------------|---|---|
| AMENDMENT A | 4-2605 | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | 8 | Minus | 20 |
| Independent | 1 | Minus | 3 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

| RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|
| X \$ 25 = | |
| X \$ 100 = | |
| + \$ 180 = | |
| TOTAL ADDI. FEE | |

OR

| RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|
| X \$ 50 = | |
| X \$ 200 = | |
| + \$ 360 = | |
| TOTAL ADDI. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|------------|---|---|
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | | Minus | |
| Independent | | Minus | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|
| X \$ 25 = | |
| X \$ 100 = | |
| + \$ 180 = | |
| TOTAL ADDI. FEE | |

OR

| RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|
| X \$ 50 = | |
| X \$ 200 = | |
| + \$ 360 = | |
| TOTAL ADDI. FEE | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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